Los Angeles Police Department

Mental Evaluation Unit

September 2016



Specialized Policing Responses: Law Enforcement/Mental Health Learning Site October 15, 2010





March 29, 2011 June 20, 2012

The Los Angeles Police Department (LAPD) has implemented several complementary program responses to address the complex mental health needs within its jurisdiction. For over four decades, the LAPD has deployed the Mental Evaluation Unit (MEU) to assist police officers with mental health calls for service. In 1993, Los Angeles was one of the first communities to develop police/mental health co-responder teams (Systemwide Mental Assessment Response Team, or *SMART*). The program is co-supported by the Los Angeles County Department of Mental Health (LACDMH) and is the largest of its kind in the country. The program was designed to effectively engage and link persons with a mental illness to appropriate services. In 2003 the Department implemented a *Crisis Intervention Team* (CIT) training (40 hours) and strategy as a pilot. The CIT pilot program was assessed and discontinued in 2004; however, an expansion of the MEU/SMART strategy was initiated. In 2006 the Department delivered the *Introduction to Mental Health* training (24 hours) and over 800 officers were trained between the two courses.

Even after the implementation of the above strategies, a serious problem remained that involved persons with a mental illness who were the subject of a high number of emergency calls for service. Those calls for service cost the City and County millions of dollars in emergency resources without effective or measurable outcomes. In 2005, the LAPD developed the Case Assessment and Management Program (CAMP) to identify, monitor, and engage those subjects and to construct a case management approach that links them to appropriate services. The CAMP averages 15-20 new cases each week and its cases never close. The CAMP pairs police detectives with psychologists, nurses and/or social workers from the LACDMH to develop long-term solutions for the individual client's needs.

Effective in 2016, MEU SMART operates 24-hours/7-days-a-week, including the MEU-Triage Desk. The primary function of the Triage Desk is to triage all Department contacts with persons who suffer from a mental illness. Triage personnel provide advice and guidance to responding officers in the field and document all Department contacts with the mentally ill, who are in crisis, on a Mental Evaluation Incident Report. Those reports and database are separate from the Crime Analysis Databases and are protected from outside access, which protects the privacy of the individuals who are contacted. A triage mental health nurse sits alongside the officer and queries the LACDMH database to identify case managers, psychiatrists, or treatment centers. Collectively, the triage staff determines whether to dispatch a SMART unit or to direct the patrol officers to transport the person directly to a mental health facility. If the Triage personnel determine that a person has repeatedly contacted police or has demonstrated high risk behaviors, the case will be referred to the CAMP for more intensive case management.

In 2014, the Department reviewed its mental health training and a re-design was initiated. At the end of the 2014, the Department presented a POST-approved *Mental Health Intervention Training* (MHIT), which is a 40-hour course that is delivered 24 times a year to first responders (officers) who have the greatest likelihood of interaction with persons who suffer from a mental illness and who are in crisis.

In 2015, the Department, in partnership with the LACDMH, implemented an expansion plan that will double the number of SMART units that are deployed and establish Bureau liaison officers in each geographic Bureau. This expansion is expected to be completed by August 2016.

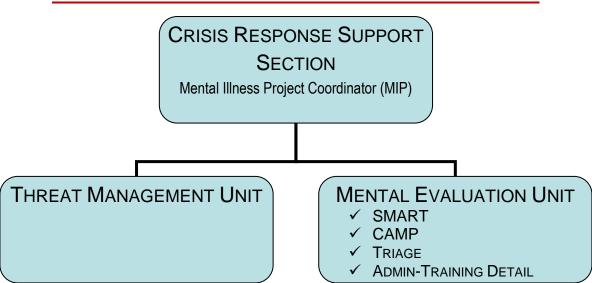
PROGRAM HIGHLIGHTS

LOS ANGELES POLICE DEPARTMENT MANUAL

1/240.30 Contact With Persons Suffering From a Mental Illness. In police contacts with persons suffering from a mental illness, the goal of the Department is to provide a humane, cooperative, compassionate and effective law enforcement response to persons within our community who are afflicted with mental illness. The Department seeks to reduce the potential for violence during police contacts involving people suffering from mental illness while simultaneously assessing the mental health services available to assist. This requires a commitment to problem solving, partnership, and supporting a coordinated effort from law enforcement, mental health services and the greater community of Los Angeles.

- Multi-layered approach that includes co-deployed response, MHIT and follow-up teams.
- Comprehensive data collection and information-sharing procedures.
- Mental health professionals embedded in law enforcement agency.
- Staffed by 61 sworn officers and 30 LADMH clinicians.

OVERVIEW OF MENTAL EVALUATION-RELATED OPERATIONS



The primary mission of the MEU is to handle mental illness crisis calls-for-service in support of patrol operations. The MEU evaluates persons who pose a danger to themselves or to others per Welfare and Institutions Code (WIC) §5150. The MEU refers mental illness and homeless outreach missions to other designated non-law enforcement Los Angeles County Mental Health resources.

2015 Calls for Service 16,641 WIC §5150 Hospitalization Rate 71%

Referred to Mental Health Services 6%

MISSION STATEMENT

The mission of the Mental Evaluation Unit is to reduce the potential for violence during police contacts that involve people who suffer from mental illness and to simultaneously assess the mental health services available to assist them.

GOALS

- Prevent unnecessary incarceration and/or hospitalization of mentally ill individuals.
- Provide alternate care in the least restrictive environment through a coordinated and comprehensive system-wide approach.
- ✓ Prevent the duplication of mental health services.
- ✓ Facilitate the speedy return of police patrol units to patrol activities.

MENTAL HEALTH CRISIS RESPONSE PROGRAM (MHCRP)

The MHCRP is established as a function under Detective Bureau. The Assistant Commanding Officer, Chief of Detectives, is the MHCRP Coordinator. The Officer-in-Charge of the Crisis Response Support Section, Detective Support and Vice Division, is the **Mental Illness Project Coordinator** whose responsibilities include the following:

- Represent the Department on all matters involving police response to mental illness.
- Maintain, attend and support the MHCRP Advisory Board, which meets quarterly and consists of community stakeholders and persons in the mental health community;
- Provide information to outside agencies regarding Department procedures for handling persons with mental illness;
- Analyze state and federal legislation that affect persons with mental illness;
- Maintain liaison with DMH and hospitals on issues related to persons with mental illness;
- Design and conduct in-service mental illness training, and provide expertise and support to Training Division regarding all recruit officer mental illness-related training;
- Conduct audits of non-categorical Use of Force reports that involve persons with indicators of mental illness;
- Coordinate data collection to evaluate Department mental health crisis response; and,
- Review and revise Department strategies, policies, and procedures related to the handling of persons with mental illness.

MENTAL EVALUATION UNIT (MEU)

OVERVIEW OF MEU RESPONSIBILITIES

- Conduct preliminary investigations of persons who come to the attention of law enforcement and are suspected of having a mental illness, amnesia, senility, post-alcoholic or delirium tremors, and/or who require psychopathic examinations.
- Investigate persons suspected of being escapees from mental institutions.
- Coordinate the assignment of State Department of Mental Hygiene apprehension and transportation orders.
- Arrange, upon request, for uniformed officers to assist Lanterman-Petris-Short Act (LPS)
 designated Psychiatric Mobile Response Teams or court designated conservators in the
 apprehension of persons who suffer from mental illness and are placed on a mental health hold.
- Maintain, amend, and distribute the Department "Incidents Involving Persons Suspected of suffering from Mental Illness," Notebook Divider.
- Provide advice to officers on the confiscation and disposition of firearms or other deadly weapons confiscated from persons with mental illness.
- Provide information on attempt suicide, barricaded suspect, or hostage incidents that involve persons with mental illness.
- Assist field officers with intervention, referral, or placement of a person with mental illness to prevent the unnecessary incarceration and/or hospitalization of that person.
- Provide roll-call training relative to MEU and SMART responsibilities.
- Maintain liaison with the Missing Persons Unit to determine whether a reported missing person was placed on a 72-hour hold.
- Provide staff support for the MHCRP Coordinator and Advisory Committee.
- Maintain liaison with DMH and hospitals regarding policies and procedures that involve the detention and involuntary holds of persons with suspected mental illness.
- Provide analysis of state and federal legislation pertinent to law enforcement encounters with persons with suspected mental illness.
- Provide expertise and support to Training Division regarding all mental illness-related training.
- Conduct audits of categorical and non-categorical Use of Force reports that involve persons with indicators of mental illness.
- Review completed Use of Force reports with indicators of mental illness.
- Coordinate data collection to evaluate Department mental health crisis response.
- Review, initiate and coordinate Department mental health-related training courses.
- Maintain liaison with Psychiatric Hospitals and Mental Health Agencies.
- Maintain the Following Special Files:
 - ✓ Requests for psychopathic examination reports; and,
 - ✓ Unserved apprehension and transportation orders.

SYSTEMWIDE MENTAL ASSESSMENT RESPONSE TEAM (SMART) OVERVIEW

- Assist Department police officers whenever they contact persons with a suspected mental illness.
- Provide intervention, referral, or placement for a person with mental illness to facilitate the speedy return of field officers to other field duties.
- Prevent unnecessary incarceration and/or hospitalization of persons with mental illness.
- Provide alternate care in the least restrictive environment through a coordinated and comprehensive systemwide approach.
- Assist with intelligence functions at critical incidents.
- Assist with psychologically impaired victims at disaster scenes.

CASE ASSESSMENT AND MANAGEMENT PROGRAM (CAMP) OVERVIEW

- Manage cases that involve persons with a history of violent criminal activity caused by mental illness.
- Manage cases that involve persons with a history of mental illness who have caused numerous responses by law enforcement and the deployment of substantial police resources.
- Prevent unnecessary incarceration and/or hospitalization of persons with mental illness.
- Provide alternate care in the least restrictive environment through a coordinated and comprehensive systemwide approach.
- Maintain a file of Weapon Confiscation Receipts.

CAMP CASES INCLUDE BUT ARE NOT LIMITED TO:

- Subjects who attempt Suicide by Cop (SBC);
- Subjects who frequently utilize emergency services and/or abuse the 911 system;
- Subjects who are the subject of a SWAT response and/or high profile tactical operation;
- Veterans who suffer from Post-Traumatic Stress Disorder or other mental illness;
- Subjects involved in acts of targeted school violence:
- Mentally ill prohibited possessors (to ensure the seizure of all known firearms); and,
- Subjects enrolled in the State of California, Department of Mental Health, Conditional Release Program (ConRep).

TRIAGE DESK

- Receive mental illness crisis calls from patrol operations.
- Vet incoming calls and dispatch SMART to handle calls for service, as appropriate.
- Manage radio calls and SMART deployment.
- Coordinate client hospitalization for patrol personnel.
- Prepare MEU investigative reports.
- Maintain the MEU mental illness database.
- Coordinate outside agency response resources.
- Make appropriate notifications.
- Forward follow-up referrals to CAMP.

ADMINISTRATION AND TRAINING

TRAINING PROVIDED TO OUTSIDE LAW ENFORCEMENT AGENCIES

Since 1993, the MEU has trained personnel from the following agencies as a model co-response program. In 2010, the MEU was distinguished as a National Learning Site.

United States				
Maricopa County Sheriff Office	Arizona	Santa Ana Police Department	California	
Alhambra Police Department	California	Santa Monica Police Department	California	
Bell Gardens Police Department	California	Signal Hill Police Department	California	
Beverly Hills Police Department	California	Sonoma County Sheriff Office	California	
Burbank Police Department	California	Southgate Police Department	California	
El Segundo Police Department	California	Torrance Police Department	California	
Contra Costa County – City of Concord	California	Ventura Police Department	California	
Downey Police Department	California	Vernon Police Department	California	
Escondido Police Department	California	West Covina Police Department	California	
Glendale Police Department	California	Denver Crime Commission	Colorado	
Glenn County Sheriff Office	California	Stamford Police Department	Connecticut	
Huntington Park Police Department	California	Portland Maine Police Department,	Maine	
Inglewood Police Department	California	Baltimore Co. Maryland Sheriff Office	Maryland	
Irvine Police Department	California	Baltimore Police Department	Maryland	
La Verne Police Department	California	National Security Agency	Maryland	
Long Beach Police Department	California	Boston Police Department	Massachusetts	
Los Angeles Unified School District Police	California	Woodbury Police Department	Minnesota	
Monterey Police Department	California	Las Vegas Police Department	Nevada	
Mountain View Police Department	California	Bureau of Police, Portland	Oregon	
Newport Police Department	California	Allegheny County Sheriff	Pennsylvania	
Oakland Police Department	California	Austin Police Department	Texas	
Oxnard Police Department	California	Houston Police Department	Texas	
Pasadena Police Department	California	Plano Police Department	Texas	
Petaluma Police Department	California	Tarrant County Sheriff	Texas	
Redondo Beach Police Department	California	Texas Tech University	Texas	
Redwood City Police Department	California	Williamson County Sheriff Office	Texas	
Riverside Police Department	California	Defense Intelligence Agency	Virginia	
San Diego Police Department PERT	California	National Intelligence Agency	Virginia	
San Diego Sheriff Office	California	Bellevue Police Department	Washington	
Los Angeles County Sheriff's Department	California	New York Police Department	New York	
Los Angeles World Airports	California	Unified Police of Greater Salt Lake	Utah	
San Bernardino County	California	Tucson Police Department	Arizona	
San Francisco Police Department	California	Rochester Police Department	New York	
		RNATIONAL		
		NCE 2010		
Moorabbin Police, Melbourne	Australia	Calgary Police Department	Canada	
New South Wales Police Department	Australia	Toronto Police Department	Canada	
Queensland Police Department	Australia	Montreal Police Department	Canada	
Victoria Police Department, Melbourne	Australia	Northern Ireland Police Department	United Kingdom	
Ministere Public	Belgium	Leicestershire Constabulary	United Kingdom	

CRISIS INTERVENTION TEAM (CIT) TRAINING (40 Hours, 2002-2004) AND INTRODUCTION TO MENTAL HEALTH TRAINING (IMHT) (24 Hours, 2006-2012)

In response to the Federal Consent Decree, MEU developed a 40-hour Crisis Intervention Training (CIT) based on the Memphis Model that was established in 1988. The course was piloted from 2002 through 2003. At the conclusion of the CIT pilot, the Department chose not to continue the course and it dropped from the California Peace Officer Standards and Training (CA-POST) list of certified courses of instruction.

In 2006, MEU developed the *Introduction to Mental Health Training*, which was a 24-hour CA-POST certified course. The IMHT course was delivered from 2006 to 2012. At the end of 2012, the Department determined that the course required substantial update, so it was decertified and dropped from the CA-POST list of certified courses of instruction. To date, 801 Department personnel have received either the 24-hour or 40-hour mental health courses of instruction.

LAPD: 801
Outside agencies: 129
Total: 930

OUTSIDE AGENCIES TRAINED IN CIT AND IMHT BY LAPD			
Beverly Hills Police Department	Maricopa County Sheriff Office		
City Attorney Investigators	Mayors Crisis Response Team		
Federal Bureau of Investigation	Pomona Police Department		
Hawthorne Police Department	Redondo Beach Police Department		
Los Angeles Airport Police Department	Social Security Administration Investigators		
Los Angeles County Sheriff Office, CTU	United States Secret Service		
Los Angeles County Sheriff Office, Mental Evaluation Team	University of Southern California Department of Public Safety		
Los Angeles Unified School District Police Department	New York Police Department		

MENTAL HEALTH INTERVENTION TRAINING (MHIT) 40 HOURS (ESTABLISHED SEPTEMBER 2014)

In 2013 the MEU and Police Training and Education (PTE) began development of an updated mental health training course, and in 2015, the MHIT was developed, CA-POST certified and delivered.

The course includes an overview of mental illness, crisis de-escalation and communication techniques, the Force Options Simulator (FOS) and situation simulations that were designed to test the students' understanding of, and ability to apply, their knowledge. The MHIT is a paradigm shift from the lecture-based, PowerPoint-driven, instruction of the past, as it utilizes small interactive groups that challenge the students to work as teams and participate in a facilitated learning environment. The course also includes blocks of instruction from:

- The Los Angeles Department of Mental Health
- The Autism Society of Los Angeles (ASLA); and,
- The National Alliance on Mental Illness (NAMI).

The LAPD has provided MHIT training to the following number of students, year-to-date:*

LAPD (sworn): 850
Outside Agencies (below): 155
Total: 1005

OUTSIDE AGENCIES TRAINED IN MHIT BY LAPD			
Alhambra Police Department			
Bell Police			
Bell Gardens Police			
California Highway Patrol			
California State University Los Angeles Police			
CSG Justice Center			
Culver City Police			
Glendale Police			
Gardena Police			
Hawthorne Police			
Downey Police Department			
Leicestershire Constabulary, United Kingdom			
Los Angeles Airport Police Department			
Los Angeles City Fire Department			
Los Angeles City Park Ranger			
Los Angeles County Sheriff's Department			
Los Angeles Department of Mental Health			
Los Angeles School Police			
Montebello Police			
Monterey Park Police			
New York Police Department			
Queensland, Australia			
Redondo Beach Police			
Rochester Police Department, New York			
San Bernardino County Sheriffs			
Signal Hill Police			
Sonoma County Sheriff			
South Gate Police			
Torrance Police Department			
Tucson Police Department			
Unified Police of Greater Salt Lake City			
University of Southern California			

Last updated on September 16, 2016.

ADDITIONAL MENTAL HEALTH-RELATED TRAINING

The MEU conducts or distributes the following training courses throughout the year:

Classroom

- Mental Health Intervention Training (40 hours) 24 times a year
- Field Training Officer (FTO) Update Course (SB29 4 hours) all FTOs every two years
- Mental Health Intervention Training Update Course (8 hours) every two years
- Mental Illness Introduction for Adult Corrections Officers (8 hours)
- Dispatcher Persons with Mental Illness (8 hours)
- Armed Prohibited Persons/Mental Health Firearms Prohibition System (2 hours)
- Crisis Communication for First Responders (8 hours)
- Combat to Community/Police and Veteran Interaction (8 hours)
- School Threat Assessment Response Team (8 hours)

E-Learning

- Mental Illness Use of Force and Crisis Intervention
- Mental Illness Use of Force and Crisis Intervention Update
- Legal Environment Policing the Mentally III
- Mood Disorders
- Communicating with People with Disabilities

Tele-course

Recognizing Mental Illness: A Proactive Approach

Mandated Training

In May 2014, all LAPD sworn personnel (over 9,800) were mandated to complete the two-hour CA-POST 2013 Mental Health Update course. To date, 98% have successfully completed the training and the remaining 2% were unable to complete the training due to long-term illness or injury.

As of February 2016, all LAPD sworn personnel completed a one-hour Crisis Communications for First Responders Course that was presented by the MEU staff as part of the Public Trust Training.

9-1-1 PROTOCOLS

All Police Service Representatives (PSRs) have received eight hours of training titled, "Persons with Mental Illness." The purpose of the training was to ensure that calls involving persons with mental illness are properly categorized, dispatched, and to ensure that sufficient information is provided to responding patrol officers. This includes information such as diagnosis, medication(s), threatening behavior, and/or weapon(s). Calls for service involving mental illness are call-typed as the following:

>	918 M	Male with Mental Illness
>	918 F	Female with Mental Illness
\triangleright	918 VM	Violent Male with Mental Illness
>	918 J	Juvenile with Mental Illness
\triangleright	918 VF	Violent Female with Mental Illness
\triangleright	918 VJ	Violent Juvenile with Mental Illness
>	918 AM	Ambulance Male with Mental Illness
>	918 PM	Possible Male with Mental Illness
>	918 AF	Ambulance Female with Mental Illness
\triangleright	918 PF	Possible Female with Mental Illness
>	9073	Attempt Suicide
	907A3	Ambulance Attempt Suicide

ADDITIONAL PROTOCOLS INCLUDE THE FOLLOWING:

- In incidents that involve mental health <u>and</u> a crime, the <u>crime code</u> takes <u>precedence</u>; however, the PSR gathers additional information regarding the mental health issue.
- Uniformed patrol officers are dispatched to all calls that involve a person with mental illness, including Ambulance Attempt Suicide/Suicide calls.
- A notation is made by the PSR in the Incident Detail, "*CONTACT MENTAL EVALUATION UNIT IMMEDIATELY UPON SCENE STABILIZATION 213/996-1300*" on all calls for service that involve a person with mental illness.
- Patrol officers conduct a preliminary investigation to determine whether there is mental illness and then contact MEU for advice and possible dispatch of a SMART unit.
- If there is a medical emergency, the patrol officer must conduct an on-scene investigation, conduct a follow-up to the hospital and provide their findings to the admitting staff.

FIELD PROTOCOLS FOR CALL MANAGEMENT AND DIVERSION

After an incident is tactically stable, patrol officers must conduct an assessment of the detained individual to determine whether there is mental illness and whether the individual meets criteria for an involuntary mental health hold (WIC §5150). The incident can be managed by a SMART unit, if available, or by the patrol officers with the guidance of the MEU.

NOTIFICATIONS

When the only reason for detention is the person's suspected mental illness, the MEU <u>MUST</u> be contacted <u>PRIOR</u> to transporting an apparently mentally ill person to any health facility or hospital.

Exception: If the subject is injured and requires immediate medical treatment, the MEU must be contacted after the subject is transported to an appropriate medical facility.

When a person with suspected mental illness has been taken into custody for a criminal offense, MEU **MUST** be contacted **PRIOR** to the person being booked (Department Manual §4/260.20).

Officers who receive information from a mental health professional regarding a potential threat to any person (Tarasoff Notification) must immediately notify MEU.

ARREST AND BOOKING

When a person is taken into custody for a criminal offense and the person is suspected of having a mental illness, the MEU shall be contacted prior to the person being booked. When a subject is a suspect in a felony or high-grade misdemeanor crime, or has a felony or high-grade misdemeanor warrant, the criminal matters shall take precedence. If the subject is under arrest for a low-grade misdemeanor crime, misdemeanor warrant, or infraction, and meets the criteria for an Application for 72-hour Detention .for Evaluation and Treatment, booking is at the discretion of the Area watch commander. Arrestees suffering from mental illness may be booked at any Department jail facility. Brief information concerning the mental illness should be documented in any booking reports and under the "Additional" heading in the Arrest Report.

The MEU is available for advice and assistance to facilitate the transfer of the subject to a Los Angeles County Jail Facility. Any questions concerning the arrest, booking, housing, or transfer of an individual suspected of suffering from a mental illness should be directed to the MEU Watch Commander.

JAIL MONITORING

- All Adult Corrections Officers (ACOs) have received eight hours of training titled "Mental Illness Introduction for Adult Corrections Officers."
- All sworn jail personnel have received four hours of mental illness training.
- All arrestees are screened during the booking process and ACOs ensure that the arresting officers
 have notified the MEU if the arrestee indicated that he/she suffers from mental illness, which will
 prompt an MEU information report.

If an arrestee is determined to be in a mental health *crisis* or is suffering from a chronic mental illness, and the arrestee can be released on their own recognizance or arrange bail, jail personnel or a patrol unit will conduct the mental illness assessment and transport to a psychiatric facility. The MEU provides telephonic advice, documents the incident, and directs transporting units to appropriate hospitals.

DIVERSION PROGRAMS

- Pre-booking diversion occurs via the patrol officers or via SMART when:
 - A crime was committed;
 - The crime is a low grade misdemeanor;
 - > A report or citation and release is competed; and,
 - ➤ The person with mental illness is taken to the Psychiatric Emergency Department coordinated through the MEU.
- Post-booking diversion occurs when the subject can be released on their own recognizance or bail is posted. The subject can also be diverted to a mental health treatment provider during the arraignment process or as a condition of their plea or conviction.

MENTAL HEALTH PARTNERS

- Los Angeles County Department of Mental Health
 - ✓ System Leadership Team (SLT)
 - ✓ Court Liaison Program Community Reintegration Program (CRP)
 - ✓ Countywide Resource Management AB109
 - ✓ Jail Services Forensic Inpatient Program (FIP) (Twin Towers)
- National Alliance for Mental Illness of the San Fernando Valley
- National Alliance for Mental Illness (NAMI LA)
- Autism Society of America Los Angeles (ASALA)
- Los Angeles County Department of Health Services (LACDHS)
- State of California State Mental Health Facilities (Patton State, Metropolitan State Hospital)
- State of California Mental Health Services Act Oversight and Accountability Commission
- Hospital Association of Southern California (HASC)
- Gateways Hospitals ConRep Administrator and Community Reintegration Program (CRP)
- Los Angeles County Superior Psychiatric Court Department 95
- Los Angeles County District Attorney's Office Department 95
- Los Angeles County Superior Court Veterans Court
- California Department of Justice Bureau of Firearms (CADOJ)
- · Department of Veteran's Affairs
- Los Angeles Unified School District (Crisis Counseling)

CONFERENCES

The MEU has given presentations at the following conferences:

- 2006 National GAINS Center Conference, Boston, MA
- 2006 5th Annual Conference on Police/ Mental Health Systems Liaisons "Psychiatrists in Blue: Emerging Partnerships," Ottawa, Ontario, Canada
- 2007 National Alliance on Mental Illness, Los Angeles, CA
- 2008 National GAINS Center Conference, Washington, DC
- 2008 School Threat Assessment Response Team
- 2009 School Threat Assessment Response Team
- 2010 Post Traumatic Stress Disorder- Combat to Community, Returning Veterans, in Conjunction with the National Center for PTSD, VA, Menlo Park, CA
- 2011 Justice and Mental Health Collaboration Program National Training and Technical Assistance Event: Collaborating to Achieve and Communicate Positive Public Health and Public Safety Outcomes, Baltimore, MD
- 2011 Association of Threat Assessment Professionals, School Threat Assessment Response Team (START)
- 2012 The Justice Center, The Council of State Governments: Innovative Law Enforcement Strategies for Interacting with People with Mental Illness that Frequently Require Emergency and Crisis Services, Webinar-National.
- 2014 Association of Threat Assessment Professionals, Strategic Information Sharing and Safeguarding between Risk Management Professionals and Disciplines
- 2015 JMHCP Law Enforcement Grantee Intensive Training Summit New York
- 2015 SCA-JMHCP National Conference Washington, DC
- 2016 Beating Mental Illness USCGould School of Law
- 2016 Crisis Intervention Training International Conference Chicago
- 2016 California National Alliance on Mental Illness, Annual Conference Burlingame, Ca
- 2016 National Association for Civilian Oversight of Law Enforcement, Annual Conference-Albuquerque, NM

AWARDS, RECOGNITIONS AND ACKNOWLEDGEMENTS

UNIT AWARDS

- Certificates of Appreciation from the Los Angeles Board of Police Commissioners 2005.
- Los Angeles Police Department Police Meritorious Unit Citation, March 20, 2007.
- National Association of Counties, Achievement Award 2007.
- 21st Annual Los Angeles County Productivity and Quality, Bronze Eagle Award 2007.
- 21st Annual Los Angeles County Productivity and Quality, Million Dollar Club 2007.
- 2009 Autism Society of America, LA Hearts and Arts Award.
- 2010 Specialized Policing Responses: Law Enforcement/Mental Health National Learning Site
 as selected by the Council of State Governments Justice Center with support from the Bureau
 of Justice Assistance (BJA).
- 2011 LAPD Mental Illness Project selected as a "Bright Ideas" Award recipient from the Ash Center for Democratic Governance and Innovation at the John F. Kennedy School of Government, Harvard University.
- 2012 Autism Society of Los Angeles recognition for continued support and training.
- 2012 School Threat Assessment Response Team (START) selected as a "Bright Ideas" Award recipient from the Ash Center for Democratic Governance and Innovation at the John F. Kennedy School of Government, Harvard University.
- 2013 M.I.L.E. Award Program.
- 2016 Christine M. West Award, Forensic Mental Health Association of California (FMHAC)
- 2016 Los Angeles County Productivity and Quality Award, Special Merit Plaque, "Mental Health Training for First Responders."

INDIVIDUAL AWARDS

- (5) Police Stars for Bravery
- (4) Life Saving Medals
- (1) California Peace Officers Associations (CPOA) Award of Valor
- (1) California POST Excellence in Training Award (Post Incident Debriefs)
- (4) Employees of the Year, Detective Support and Vice Division (2011, 2013 and 2014)
- (1) Employee of Year 2003, Los Angeles County
- (1) Nurse of the Year 2007, Los Angeles County
- (1) Rising Star Award 2008, Los Angeles County
- (1) Extra M.I.L.E.(s) Award Individual 2013

ARTICLES, PUBLICATIONS, COMMUNITY FORUMS

- L.A. City View 35, Disability Forum, Persons Suffering from Mental Illness, October 2006.
- Los Angeles Times Newspaper Forum on Homelessness, KTLA Channel 5, 2007, working in conjunction with the Mayor's Safer Cities Initiative and the Mentally III.
- The BEAT Magazine, December 2007, recognition from Anthony Pacheco, President of the Los Angeles Police Commission for establishment of Autism Roll Call Training.
- Daily News Article February 1, 2008, "Special Cops Cope with Suicidal 7-Year Old or Britney."
- Los Angeles Magazine, October 2009, "The War Within" on PTSD.
- Detective Bureau Bi-Monthly, Volume 2, Issue 1, Year 2009, recognition for the establishment of the School Threat Assessment Team strategy and the successful conferences.
- Los Angeles County Department of Mental Health, Prevention and Early Intervention Early START
 project proposal, dated January 12, 2009, incorporating the School Threat Assessment Response
 Team strategy developed by the CRSS and adopted county-wide.
- A "SMART" way to help the mentally III, Specially trained teams of Police Officers and Clinicians respond to citizens in crisis, article from the Daily Journal by Pat Alston, February 4, 2009.
- Office of the Independent Monitor of the Los Angeles Police Department, Final Report, Issued June 11, 2009.
- Detective Information Bulletin, December 2009, New Search Warrant Provisions For Domestic Violence and 5150 Investigations, (Prohibited Possessor Program, 8102 WIC, CAMP).
- December 9, 2010, Los Angeles Times, "Jan Perry: Neglect of Mentally III can Bring Tragic Results."
- May 22, 2011, New York Times, "Police Seek Ways to Defuse Tensions."
- Detective Information Bulletin, March 2010, PTSD Training.
- December 18, 2012 KCET "SoCal Connected" discussed SMART operation and Prohibited Possessor, post Sandy Hook.
- January 16, 2013, KPCC Public Radio, "Federal Database for Mental Health Background Checks Incomplete."
- February 19, 2014, KPCC Public Radio, "LAPD Policy Changes to Impact How Officers Deal with the Mentally III."
- March 10-13, 2015, KPCC Public Radio, "Police and the mentally ill: LAPD unit praised as model for nation."
- July 23, 2015, California Healthline, "Evaluation Trumps Incarceration in L.A. Police Dept. Mental Health Efforts."
- December 16, 2015, "Mayor Garcetti Announces Expansion of LAPD SMART Teams."
- March 30, 2016, KABC Channel 7, "LAPD Chief Charlie Beck Discusses Public Safety, Mental Health Issues, Officer Training."

NATIONAL PUBLICATIONS

- SAMSHA, A Guide to Implementing Police-Based Diversion Programs for People with Mental Illness, 2004.
- TAPA Center, Enhancing Success of Police-Based Diversion Programs for People with Mental Illness, 2005.
- Department of Justice, Bureau of Justice Assistance, Improving Responses to People with Mental Illnesses, Strategies for Effective Law Enforcement Training, 2008.
- Department of Justice, Bureau of Justice Assistance, Improving Responses to People with Mental Illnesses, The Essential Elements of a Specialized Law Enforcement–Based Program, 2008.
- Department of Justice, Bureau of Justice Assistance, Law Enforcement Responses to People with Mental Illness, A Guide to Research-Informed Police and Practice, 2009.
- IACP, SAMSHA, BJA, National Policy Summit, Building Safer Communities: Improving Police Response to Persons with Mental Illness, 2010.
- Department of Justice, Bureau of Justice Assistance, Statewide Law Enforcement/Mental Health Efforts, Strategies to Support and Sustain Local Initiatives, 2012.

REFERENCE

TO LEARN MORE ABOUT:

The Law Enforcement/Mental Health Learning Sites, coordinated by the Council of State Governments (CSG) Justice Center and supported by the Bureau of Justice Assistance (BJA), visit www.consensusproject.org/learningsites or contact Gerard Murphy gmurphy@csg.org (646-383-5761).

Law Enforcement Responses to People with Mental Illnesses, visit www.consensusproject.org/issue_areas/law-enforcement

The Ash Center for Democratic Governance and Innovation and Bright Ideas, visit http://www.ash.harvard.edu/Home/Programs/Innovations-in-Government/Awards/Bright-Ideas. The Roy and Lila Ash Center for Democratic Governance and Innovation advances excellence and innovation in governance and public policy through research, education, and public discussion.

Three major programs support our mission:

- The Program on Democratic Governance;
- The Innovations in Government Program; and,
- The Rajawali Foundation Institute for Asia.

Social Media

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